# MULTIPLE DEPENDENT CLAIM
## FEE CALCULATION SHEET

| SERIAL NO. | FILING DATE |
|---|---|
| APPLICANT(S) | |

CLAIMS

| | AS FILED | | AFTER 1ST AMENDMENT | | AFTER 2ND AMENDMENT | | | | IND | DEP | IND | DEP | IND | DEP |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | IND | DEP | IND | DEP | IND | DEP | | | | | | | | |
| 1 | | | | | | | | 51 | | | | | | |
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| 3 | | | | | | | | 53 | | | | | | |
| 4 | | | | | | | | 54 | | | | | | |
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| 9 | | | | | | | | 59 | | | | | | |
| 10 | | | | | | | | 60 | | | | | | |
| 11 | | | | | | | | 61 | | | | | | |
| 12 | | | | | | | | 62 | | | | | | |
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| 14 | | | | | | | | 64 | | | | | | |
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| 18 | | | | | | | | 68 | | | | | | |
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| 26 | | | | | | | | 76 | | | | | | |
| 27 | | | | | | | | 77 | | | | | | |
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| 36 | | | | | | | | 86 | | | | | | |
| 37 | | | | | | | | 87 | | | | | | |
| 38 | | | | | | | | 88 | | | | | | |
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| 42 | | | | | | | | 92 | | | | | | |
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| 50 | | | | | | | | 100 | | | | | | |
| TOTAL IND. | | | | | | | | TOTAL IND. | | | | | | |
| TOTAL DEP. | | | | | | | | TOTAL DEP. | | | | | | |
| TOTAL CLAIMS | | | | | | | | TOTAL CLAIMS | | | | | | |